

**REMARKS**

Claims 1 to 24 are pending. The Examiner withdrew claims 10, 21, 23, and 24 from consideration. Claims 1 to 9, 11 to 20, and 22 are under examination.

On February 14, 2008, Applicants' undersigned representative and the Examiner discussed the October 17, 2007 Office Action. Applicants' representative pointed out that no reasons for the rejection of claims 5 to 7, 13 to 19, and 22 are clearly indicated in the Office Action. The Examiner stated that the discussion of Broome et al. on the top half of page three of the Office Action should be treated as a rejection of claim 1 and that the Examiner would address the other claims for which no reasons for rejection were presented in the next Office Action.

The Examiner rejected claims 1 to 4 and 11 to 12 under 35 U.S.C. § 102(b) as anticipated by U.S. Patent No. 5,059,183 to Semrad.

Applicants respectfully traverse this rejection of the claims. Claim 1 recites a medical device comprising an elongated member configured to be advanced along a vascular path of a patient and having first end and second ends both being adapted for intravascular insertion. Semrad does not teach or suggest such a medical device. The Examiner contends that guide wire 10 of Semrad has opposite first and second ends having different structures and that both ends are configured for intravascular insertion. The Examiner identified a first end (distal end 11) and attempted to identify a second end by stating "(the segment from the right side of element 13)". While there is a proximal end, Semrad does not show or describe this proximal end. Accordingly, it is just speculation as to what form the proximal end might take. The proximal end might have a knob or handle on it. There is no way to know whether the proximal end of the guide wire 10 of Semrad meets the language of claim 1 reciting "adapted for intravascular insertion". Semrad never teaches or suggests that the proximal end should be inserted intravascularly.

In addition, neither end of the guide wire 10 is described or shown to be adapted for intravascular insertion. The device of Semrad is shown piercing skin and muscle (see Figures 3 and 4) and is never described as being used intravascularly. The subject matter of claim 1 is not taught or suggested by Semrad. All other claims in this rejection depend from claim 1 so the same analysis applies to them. Accordingly, Applicants respectfully request that the Examiner withdraw this rejection of the claims.

As discussed above, during a phone conference with Applicants' representative, the Examiner indicated that the discussion of Broome et al. (U.S. Patent No. 6,152,946, "Broome") on the top half of page three of the October 17, 2007 Office Action should be treated as a rejection of claim 1.

Applicants respectfully traverse this rejection of the claims. Claim 1 recites a medical device comprising an elongated member configured to be advanced along a vascular path of a patient and having first end and second ends both being adapted for intravascular insertion. Broome does not teach or suggest such a medical device.

The Examiner contends that in Figure 21 of Broome, elongated member 283 has opposite first at 308 and second ends 280, where both the first and second ends are adapted for intravascular insertion. The Examiner's reference to second end 280 is not understood. Reference number 280 refers to retrieval sheath 280—not to an end. Column 9, lines 50 and 51. The Examiner's reference to first end 308 as part of the elongated member 283 is not understood. Flanged end 308 is part of inner tubular member 284—not outer tubular member 283. Column 10, lines 1 to 4. Applicants respectfully request clarification of the Examiner's rejection.

Broome describes an outer tubular member 283 formed of a composite structure including a first tubular portion 288 and a second tubular portion 290. Column 9, line 50, to column 10, line 20. The first tubular portion 288 includes a proximal end that is not shown. Column 9, lines 61 and 62. This proximal end that is not shown is the proximal

end of outer tubular member 283. The second tubular portion 290 includes a distal end 296. This distal end 296 is the distal end of outer tubular member 283. The proximal end of outer tubular member 283 is never described as being configured for intravascular insertion and is never described as being intravascularly inserted. The proximal end of outer tubular member 283 must remain outside the patient so that it can be manipulated by a physician. Column 10, lines 9 to 42.

While there is a proximal end of outer tubular member 283, Broome does not show or describe this proximal end. Accordingly, it is just speculation as to what form the proximal end might take. There is no way to know whether the proximal end of Broome meets the language of claim 1 reciting “adapted for intravascular insertion”. Broome never teaches or suggests that the proximal end should be inserted intravascularly. Accordingly, the subject matter of claim 1 is not taught or suggested by Broome. The same analysis applies to any dependent claims that are included in this rejection over Broome.

In addition, the Examiner states that element 308 is considered as a delivery structure and element 280 is considered as a retrieval structure. Applicants do not understand this statement because element 308 is part of the distal portion of retrieval sheath 280 and there is no teaching or suggestion that the proximal end of retrieval sheath 280 could be used as a delivery sheath. Column 9, line 50, to column 10, line 8. The proximal end of retrieval sheath 280 is not shown or described.

In view of the remarks above, Applicants respectfully request that the Examiner withdraw this rejection of the claims.

The Examiner rejected claims 8, 9, and 20 under 35 U.S.C. § 103(a) as being unpatentable over Broome et al. in view of U.S. Patent No. 5,662,703 to Yurek et al. (“Yurek”).

Applicants respectfully traverse this rejection of the claims. Claims 8 and 9 depend from claim 1. As discussed above in connection with claim 1, Broome does not teach or suggest the subject matter of claim 1. Because claims 8 and 9 depend from claim 1, the same arguments apply to these claims. Yurek does not remedy the defects of Broome.

Claim 20 depends from claim 18, which depends from claim 17. Claim 17 recites language similar to claim 1 except that the language “the first end having a different structure than the second end” has been replaced with “the first end comprising a delivery sheath, the second end comprising a retrieval sheath”. Broome does not teach or suggest an elongate member having a first end comprising a delivery sheath and a second end comprising a retrieval sheath. In the discussion of Broome at the top half of page three of the October 17, 2007 Office Action, the Examiner stated that element 308 is considered as a delivery structure and element 280 is considered as a retrieval structure. Applicants do not understand this statement because element 308 is part of the distal portion of retrieval sheath 280 and there is no teaching or suggestion that the proximal end of retrieval sheath 280 could be used as a delivery sheath. Column 9, line 50, to column 10, line 8. The proximal end of retrieval sheath 280 is not shown or described. Accordingly, Broome does not teach or suggest an elongate member having a first end comprising a delivery sheath and a second end comprising a retrieval sheath. Yurek does not remedy the defects of Broome.

In view of the remarks above, Applicants respectfully request that the Examiner withdraw this rejection of the claims.

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of time under 37 C.F.R. § 1.136 not accounted for above, such an extension is requested and the fee should also be charged to our deposit account.

Respectfully submitted,

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By 

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